

Official FAX Transmittal

APR 27 2005

Docket No.: 41428.0333 US-1

Applic. No.: 09/532,708 **Group Art Unit.:** 1637
Confirm. No.: 8874 **Examiner:** Teresa E. Strzelecka
Applicant: Sarita Kumari Jain,
et al
Filed: March 22, 2000
For: High-Throughput Gene Cloning and Phenotypic Screening

To: USPTO Centralized FAX number **Fax:** 703.872.9306
From: Daniel M. Becker (Reg. No. 38,376)
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No. of Pages: 2 (including cover)

Submitted herewith for filing:

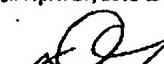
- 1) Request for withdrawal as attorney or agent and change of correspondence address
(1 page)

Respectfully submitted,


 Daniel M. Becker (Reg. No. 38,376)
CERTIFICATE OF FACSIMILE TRANSMISSION-37 CFR §§ 1.6(d), 1.8(a)(1)(i)(B)

I hereby certify that this correspondence is being transmitted by facsimile on April 27, 2005 to the United States Patent and Trademark Office at the facsimile number set forth above.

Date: April 27, 2005


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PAGE 1/2 RCVD AT 4/27/2005 2:43:20 PM [Eastern Daylight Time] SVR:USPTO-EFXRF-1/J:DNIS:8729306:CSID:650 324 0638:DURATION (mm:ss):01:24

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Approved for use through 11/30/2005. OMB 0611-0035

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	09/532,708
Filing Date	03/22/2000
First Named Inventor	Sarita Kumari Jain
Art Unit	1637
Examiner Name	Teresa E. Strzelcak
Attorney Docket Number	41428-0333 US-1

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application

- all the attorneys/agents of record.
 The attorneys/agents (with registration numbers) listed on the attached paper(s), or
 The attorneys/agents associated with Customer Number

Not Approved

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

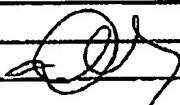
The reasons for this request are: Assignee of Record has requested transfer of responsibility for application

CORRESPONDENCE ADDRESS

1. The correspondence address is NOT affected by this withdrawal.
 2. Change the correspondence address and direct all future correspondence to:

Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Anton J. Bokal, J.D., Ph.D., Invitrogen Corporation			
Address	1800 Faraday Avenue			
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Signature		Registration No.	38,376	
Date	April 27, 2005	Telephone	650-324-7014	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Not of Record

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